# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 09, 2007**
**Secretary of State**

DOCUMENT# N03000003950

**Entity Name:** THE HOUSE OF DAVID FOUNDATION, INC.

**Current Principal Place of Business:**

4902 N. MACDILL AVE. #306
TAMPA, FL 33614

**New Principal Place of Business:**

5158 PURITAN CIRCLE
TAMPA, FL 33617

**Current Mailing Address:**

5158 PURITAN CIRCLE
TAMPA, FL 33617 US

**New Mailing Address:**

**FEI Number: 11-3722424** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**

**Name and Address of Current Registered Agent:**

JOHNSON, TEDDY
4902 N. MACDILL AVE. #306
TAMPA, FL 33614 US

**Name and Address of New Registered Agent:**

JOHNSON, TEDDY
5158 PURITAN CIRCLE
TAMPA, FL 33617 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____ 05/09/2007
Electronic Signature of Registered Agent — Date

**OFFICERS AND DIRECTORS:**

Title: CEOP ( ) Delete
Name: CLEMENT, ANN
Address: 5158 PURITAN CIRCLE
City-St-Zip: TAMPA, FL 33617

Title: VP ( ) Delete
Name: JOHNSON, TEDDY
Address: 4902 N. MACDILL AVE. #1609
City-St-Zip: TAMPA, FL 33614

Title: VD ( ) Delete
Name: WILLIAMS, CATHERINE
Address: 1404 CARTIER DRIVE, APT 3
City-St-Zip: TAMPA, FL 33612

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: JOHNSON, TEDDY
Address: 5158 PURITAN CIRCLE
City-St-Zip: TAMPA, FL 33617

Title: VD (X) Change ( ) Addition
Name: WILLIAMS, CATHERINE
Address: 1418 SUMMERGATE DRIVE
City-St-Zip: VALRICO, FL 33594

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANN CLEMENT CEOP 05/09/2007
Electronic Signature of Signing Officer or Director — Date